

Satisfaction Survey of Living Kidney Donors Patients with Enhanced Recovery Protocol

Aiden Tobin

Jill Knolle LMSW, MPH

George Rofaiel MD

Follow this and additional works at: <https://scholarlyworks.lvhn.org/research-scholars>



Part of the [Medicine and Health Sciences Commons](#)

Let us know how access to this document benefits you

This Poster is brought to you for free and open access by LVHN Scholarly Works. It has been accepted for inclusion in LVHN Scholarly Works by an authorized administrator. For more information, please contact LibraryServices@lvhn.org.

Satisfaction Survey of Living Kidney Donors Patients with Enhanced Recovery Protocol

Aiden Tobin, Jill Knolle LMSW, MPH, George Rofaiel MD
Lehigh Valley Health Network, Allentown, Pennsylvania

Introduction

Enhanced recovery (ERAS) has been introduced to surgery many years ago. However, it lagged in the field of organ transplantation. We had a theory that we could achieve similar or better satisfaction and pain control outcomes using a combination of technology and ERAS [1].

Objectives

- Determine whether robotic kidney donation yields similar patient satisfaction scores compared to laparoscopic kidney donation
- Determine whether the same-day discharge of live kidney donors had differences in satisfaction compared to donors staying one or more days
- Determine the overall pain of live donors, comparing both same-day and > 1-day discharge, as well as robotic and laparoscopic groups

Methods

Develop Model

Conduct a chart review of live kidney donors for FY 2022-2024 and create a REDCAP survey to send to these donors

Collect Responses

Distribute survey via email and phone communications to obtain maximum donor participation in satisfaction survey

Analyze data

Describe trends seen in REDCAP between laparoscopic and robotic kidney donations and duration of stay

Results

Patient Demographics			
Variables	All Donors Surveyed (N=75)	Robotic Assisted Donors (N=46 , 61.3%)	Laparoscopic Donors (N= 29 , 38.7%)
Male (%)	45%	37%	57%
Age when Donating, (range)	45, (53)	46, (44)	43, (47)
Race (%)			
White	92%	93%	90%
African American	3%	2%	3%
Asian	1%	2%	0%
Native American	0%	0%	0%
Other	5%	2%	7%
Ethnicity (%)			
Hispanic or Latino	5%	7%	3%
Not Hispanic or Latino	93%	93%	28%
Prior Surgeries	32%	35%	30%

Figure 1: Patient Demographics for Total Population Base Surveyed

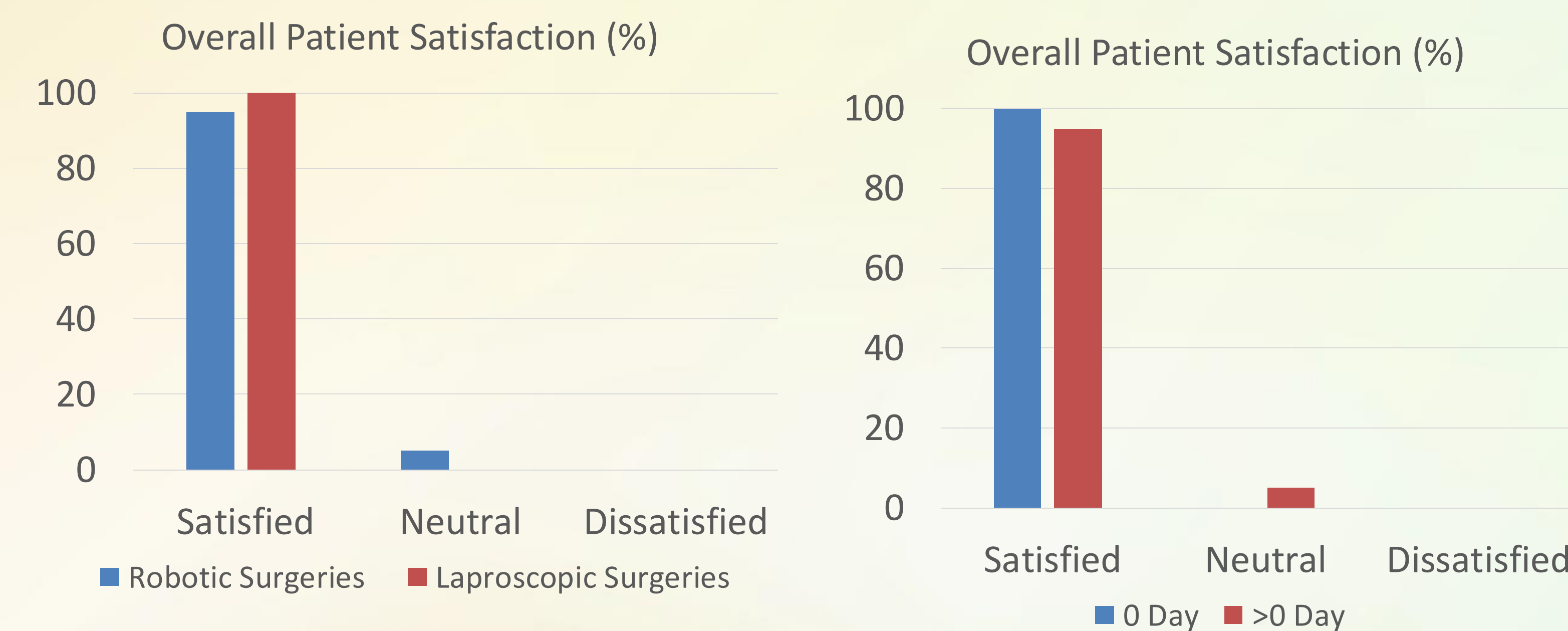


Figure 2: Comparison of Overall Patient Satisfaction Scores

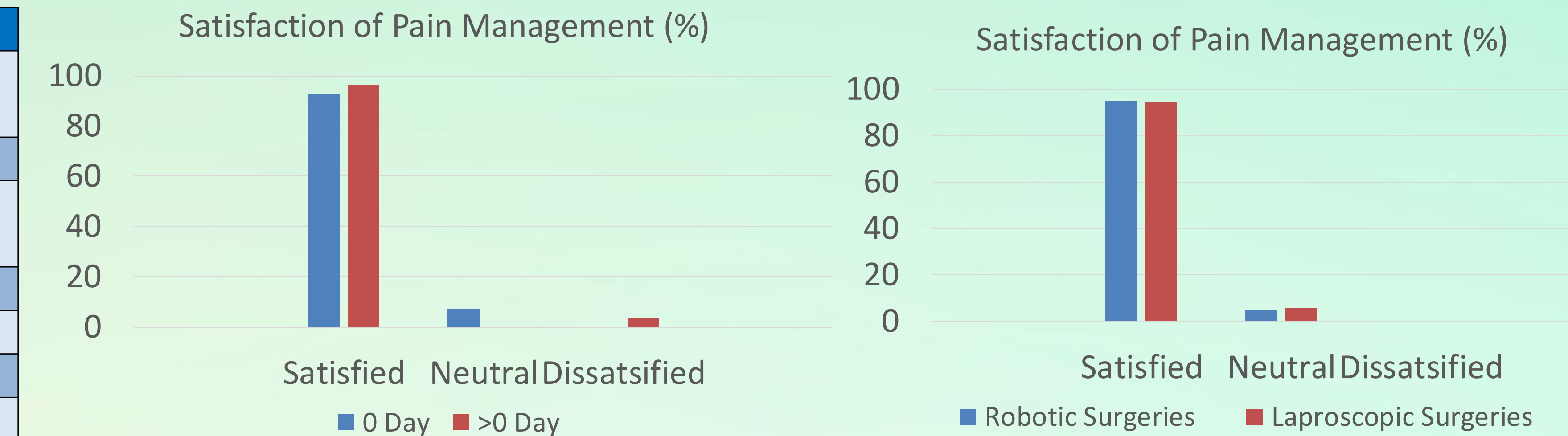


Figure 3: Comparison of Pain Management Satisfaction Scores

Conclusions

- Laparoscopic and robotic kidney donors had very similar satisfaction scores; the addition of new technology does not take away from patient satisfaction while allowing for faster discharge and potentially return to activity
- Robotic donors had slightly better pain management scores and allowed for significant number of same day. Patients had a higher overall satisfaction score average
- Donor nephrectomy is a major operation. Utilizing less traumatic technology (RDN) [2] and an enhanced recovery protocol led to a slight improvement in satisfaction and pain scores while allowing for same-day surgery.

References

1. Prospective, double-blind, randomized clinical trial comparing an ERAS pathway with ketorolac and pregabalin versus standard of care plus placebo during live donor nephrectomy for kidney transplant. Campsen J, Call T, Allen CM, Presson AP, Martinez E, Rofaiel G, Kim RD. Am J Transplant. 2019 Jun;19(6):1777-1781. doi: 10.1111/ajt.15242. Epub 2019 Jan 28. PMID: 30589514
2. Robotically assisted donor nephrectomy for kidney transplantation. Horgan S, Benedetti E, Moser F. Am J Surg. 2004 Oct;188(4A Suppl):45S-51S. doi: 10.1016/j.amjsurg.2004.08.028. PMID: 15476651



Use the QR code to view the survey model sent to living kidney donors for this study